INELIGIBLE VOLUNTEER RECORD SHEET
REGISTRATION SERVICE
BOY SCOUTS OF AMERICA

DATE: 11/13/91

FULL NAME Marcos Adrian Arevalo S.S. NO. ____
(No initials if you can possibly get full name)

ADDRESS [redacted] Exchange Counselor

CITY Mexico City STATE Mexico ZIP CODE ____

DATE OF BIRTH 4/10/60 (This is important and should be exact)

APPROXIMATE AGE 31 (To be used ONLY when date of birth is not known)

RELIGION Evangelic NATIONALITY (Citizen of) Mexico

OCCUPATION IND, Electonics ESE

EDUCATION Mechanical Elecrician/Electronic Computers and communication

WEIGHT 178 HEIGHT 5'9" RACE Cauc/Mexican

COLOR OF HAIR ____ COLOR OF EYES ____

DISTINGUISHING PHYSICAL CHARACTERISTICS ____

HOBBIES OR SPECIAL INTERESTS ____

MARRIED /__/ SINGLE /__/ NAME OF SPOUSE ____

CHILDREN ____
(Name, number, ages, if possible)

SCOUTING CONNECTIONS:

UNIT #	CITY	STATE	POSITION	DATE REGISTERED	DATE RESIGNED
International Camp Staff Program					

Chartered Organization ____

SPECIAL RECOGNITIONS ____

Check off list of attached documentation

1. Description of incident
2. Victim(s) statement
3. media reports
4. Legal proceedings
5. Offender's statement
6. Official notification of termination
7. Found quilty/innocent by court

NOV 25 1991

Handled testicles of a scout.
Charged with indecent libertie
1985

CONFIDENTIA

Council International Camp Staff Signed Registration/National
SCOUT EXECUTIVE

NOV 12 1991

F. STARON

3828r-eko-6/7/91

BOY SCOUTS OF AMERICA
National Office
1325 West Walnut Hill Lane
P.O. Box 152079, Irving, Texas 75015-2079
214-580-2000

SET UP FILE WITH INFO AVAILABLE
PI Ernst 11-13-91

November 11, 1991

SUBJECT: INELIGIBLE VOLUNTEER FILE
MARCOS ADRIAN LEAL AREVALO

FROM: Mark L. Dama
Assistant Director
Insurance and Risk Management

TO: Paul I. Ernst
Director
Registration Service

Please find attached various information on the above referenced individual who may be a possible candidate for the Ineligible Volunteer File.

The attached is as follows:

Documentation from the Mason County Sheriff's Department; International Camp Staff application; various information regarding the hearing's

Should you have any questions, please do not hesitate to call.

Mason County Sheriff's Department
Shelton, WA 98584

STATE OF WASHINGTON)
)
COUNTY OF MASON)

Statement of ______________________, being first duly sworn on oath deposes and says:

My name is [redacted], I am 12 years of age and was born on [redacted], at ______________.

I am ~~married~~ / single and reside at [redacted] ORTING

______________________, phone [redacted]. I am ~~employed~~ by STUDENT, [redacted], since 7th GRADE.

This statement taken by DET GARY J. CRANE

at 1030 hours on 08-7-25, at ABOVE RES.

Q: QUESTIONS BY DET CRANE

A: ANSWERS BY [redacted]

Q: DID YOU HAVE A PROBLEM AT CAMP HAHOBAS LAST WEEK?

A: YES.

Q: DO YOU KNOW THE NAME OF THE PERSON WHO CAUSED THIS PROBLEM FOR YOU?

A. MARCOS, I DON'T KNOW HIS LAST NAME.

Q: CAN YOU DESCRIBE THIS PERSON, MARCOS?

A: HE HAS BAD BREATH, BLACK HAIR, SMALL

[redacted] [redacted]

Witness Signature

Witness

Page 2 of ______ Statement of ______

Eyes, his cheeks puff out, nose kinda pushed in.

Q: Anything else about Marcos?
A: He's Mexican.

Q: What did Marcos do to you?
A: He just played with me, he tried to, I hit his hand.

Q: Can you tell me what you mean by "played with me"?
A: He just reached over and played with my balls.

Q: Where were you when this happened to you?
A: In a teepee by U-Lk.

Q: How were you dressed?
A: Long underwear and a sweatshirt.

Q: ~~Were~~ Were you in sleeping bag
A. Yeah.

Q: How was Marcos dressed?

[redacted] [redacted]

Witness Signature

A: I don't know.

Q: Why is that?
A: Because it was dark.

Q: Did he appear to have clothes on?
A: Yeah.

Q: What did he say to you the first time?
A: Nothing, he never said anything any of the times.

Q: Did he attempt to kiss you any where?
A: No.

Q: Did he attempt to put his fingers on anything else in your area?

A: No he just reached down to my crotch to reach for my balls.

Q: How many times did he do this to you?
A: About three

[redacted]

Witness

Signature [redacted]

Witness

Page 4 of ______ Statement of ______

Q: Did this all happen the same night, early morning?
A: Right

Q: Why did he pick on you?
A: I don't know, I guess I was sleeping by him.

Q: How many people slept in your tee pee
A: It started out to be two of us, then he must have come in latter.

Q: Where was Marcus earlier?
A: Sleeping outside the tee pee, I guess.

Q: Who was the other ~~perp~~ person in the tee pee?
A: An Eagle Scout by the name of [redacted].

Q: Was Marcus part of your scout group or troop?
A: No, he was just an exchange counselor

[redacted] [redacted]
Witness Signature

Done
[illegible]

Page 5 of ______ Statement of ______

Q: Who did you report this to, first?
A: My friends.

Q: Anyone in charge at the camp?
A: My friends told our Scout master, who talk to Mr Mike Dewitt

Q: Did you ever speak to Marcos?
A: Before this happened, we went to a class and he's like a teacher, I couldn't understand what he said.

Q: Did Marcos ever threaten you in any manner?
A: No

Q: Did Marcos do anything to [redacted]?
A: No

Q: Did you give permission to Marcos to touch you?
A: No

Q: Is it possible Marcos touched you accidently?
A: No.

[redacted] [redacted]

Witness Signature

Witness

Mason County Sheriff's Department
Shelton, WA 98584

Page 6 of ____ Statement of ____

Q: What to you believe he was trying to do to you?
A: I don't know, get his trills, see what I had.

Q: Why did Marcus stop?
A: It was getting close to time to get up.

Q: So, each time he touched you, you fell back to sleep?
A: Right.

Q: Are you positive it was Marcus who touched you?
A: Yes.

Q: What you have told me is it the truth?
A: Yeah.

Q: Anything else you wish to add?
A: No.

[redacted]

Misc. Rpt: X | Juv. Rpt | Officer: Crane | Officer No: 34 | Div: D | Report Number: 5707-1 85-9307-1

Arrest Rpt | Warrant Req | Charge/Incident: X 14.C. Indecent Liberties | Case File: Yes / No | Page of

Date: 080385 | Time: 1521 | Ph | Person

Location of Incident: Camp Hahobas, Boy Scout Camp (Mason co)

Occurred Between: Time 0723 Date -072485 Time 2300- Date 0500

MTR		Name (Last, First, Middle)	Race	Sex	DOB
Comp.	Xx	[redacted]	Cau	F	
Address		[redacted] Orting Wa.	Home Phone: [redacted]		

MTR		Name (Last, First, Middle)	Race	Sex	DOB
Victim	XX	[redacted]	Cau	M	[redacted]
Address		same as above			

MTR		Name (Last)	First	Middle	Race	Sex	DOB
Suspect	X	Arevalo	Marcos	Adrian	Cau	M	041060
Address		Mexico City Mexico		Employed/School: Boy Scouts			

Other Persons: Micheal Davitt, Camp Director,, Ph# [redacted]

[redacted], witness, [redacted] Tacoma Wa. 98446 Ph# [redacted]

The Complainant reports her son, [redacted] while at the Boy Scout Camp was molested by the above named suspect. The Suspect was a member of the camp staff, as exchange scout leader/instructor from Mexico for the summer. Investigation continues.

Approved By: [signature]

CONF027217

Officer's Report
Case #85-5907-1

8-6-85 Detective Crane and myself contacted Marcos Adrian Arevalo at a restaurant across from the courthouse in Tacoma. Marcos was staying with the owners of the restaurant and is in the U.S. as an exchange Boy Scout Counselor. Marcos was the suspect in an alleged Indecent Liberties that occurred at Camp Hahobas in the Tahuya peninsula.

Marcos was read his rights in spanish by Officer William Meeks of Tacoma P.D. Marcos stated that he would prefer to have an attorney present who was fluent in spanish before he answered questions. The interview was terminated at this point.

8-7-85 Detective Crane contacted the victim in Orting at his residence and obtained a statement reference the incident. Detective Crane contacted me at the Tacoma P.D. and we went to the restaurant and contacted Marcos at about 12:40. Based on the victim's statement, Marcos was advised that he was under arrest and he stated that he understood. I then transported Marcos to the Mason County Sheriff's Office for booking.

Robert Rabelo arrived at the Jail to act as an interpreter and Larry King was contacted since Marcos had indicated a desire for an attorney. Marcos was read his rights in spanish by Mr. Rabelo and he signed the form stating that he understood his rights. Larry King conferred with Marcos for a short time and Marcos decided to follow the advise of Mr. King and not give a statement.

The interview was terminated and Marcos was booked.

Rick Thompson, detctive
Mason County Sheriff's Office

Officer's Report
Case Number: 85-5907-1

08/12/85 This writer contacted [redacted], possible witness and tent partner to the victim, via telephone. [redacted] acknowledged he was in the tee pee with the victim and Marcos on the night in question. [redacted] stated that he did not observe or hear any unusal activity between [redacted] and Marcos Arevalo. [redacted] expressed some concerns about the validity of the allegations against Marcos. His first concern was the fact why [redacted] did not ask for help if something was happening to him.
[redacted] said that he was in the same tee-pee and only a few feet from the victim. [redacted] stated that Marcos would not do anything like that to anyone and does not understand why anyone would make such allegation against Marcos.
This writer verified with [redacted], that he did not hear or see Marcos touch [redacted] in any manner. Further [redacted] first learned of the problem the next morning from the Camp Director Mike Davitt. The victim, [redacted] had requested to sleep in the tee-pee occupied by [redacted] Marcos was not assigned a particular tent to sleep in. [redacted] stated that Marcos came into the tent after he was asleep.

Gary J. Crane, Detective
Mason County Sheriff's Office

..ason County Sheriff's De..artment
Shelton, WA 9858
STATE'S WITNESS LIST

Witness: George Leonhard
Address: [redacted] Tacoma
DOB: Phone: [redacted]

Witness: Michael Davitt
Address: [redacted] st. Tacoma
DOB: Phone: [redacted]

Witness: Dana Anderson
Address: [redacted] Tacoma, Wa
DOB: [redacted] Phone: [redacted]

Witness:
Address:
DOB: Phone:

Witness:
Address:
DOB: Phone:

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DOB: Phone:

Witness:
Address:
DOB: Phone:

JULY 31, 1985

ON THE EVENING OF TUESDAY, JULY 30, APPROXIMATELY 20 SCOUTS WENT TO U-LAKE ON AN OVERNIGHT CAMPOUT FOR THE CAMPING MERIT BADGE. TWO CAMP STAFF MEMBERS WENT WITH THE GROUP: MARCOS LEAL AND [redacted]. ALL THE SCOUTS SLEPT OUTDOORS EXCEPT FOR SCOUT [redacted], TROOP 576, AGE 12, WHO SLEPT IN A TEPEE TOGETHER WITH STAFF MEMBER [redacted] ~~[illegible]~~

DURING THE EVENING (APPROXIMATELY MIDNIGHT - 3:00 AM) SCOUT [redacted] WAS AWAKENED BY A HAND TOUCHING HIS STOMACH AREA UNDER HIS SLEEPING BAG. THE HAND THEN RAN DOWN TO HIS GENITAL AREA. HE PUSHED THE HAND AWAY AND WENT BACK TO SLEEP. A LITTLE LATER [redacted] FELT THE SAME HAND GRABBING HIS GENITALS. HE HIT THE ARM. THEN HE ROLLED OVER ON HIS STOMACH AND WENT BACK TO SLEEP. A THIRD TIME HE FELT THE SAME INDIVIDUAL REACH DOWN AROUND HIS BUTTOCKS TO TRY TO REACH HIS GENITALS AGAIN. HE TURNED AROUND AND HIT THE INDIVIDUAL'S HAIRY

ABOUT THIS TIME THE SCOUTS WERE GETTING UP TO RETURN TO CAMP. --

THE INDIVIDUAL INVOLVED WAS CAMP STAFF MEMBER MARCOS

ARSENALO LEAL.

SCRIBE: J. Michael Dewitt

SCOUT: [redacted]

WITNESS: Michael Randall SM T-576

[redacted] T-576

ORTING, WA 98360

CONF027222

JULY 31, 1985

ON TUESDAY, JULY 30, A GROUP OF 10-15 OR MORE SCOUTS PLUS STAFF MEMBERS [redacted] AND MARCOS ARNALDO LORAL WENT TO U-LAKE FOR AN OVERNIGHT, CAMPOUT FOR CAMPING MERIT BADGE. MOST OF THE SCOUTS SLEPT OVERNIGHT OUTDOORS. MARCOS PLANNED TO SLEEP OUTDOORS BY THE FIREPLACE.

SCOUT [redacted] ASKED DANA IF HE COULD SLEEP INSIDE THE TEPEE AND DANA GAVE HIM PERMISSION. BOTH [redacted] AND [redacted] WENT TO BED ABOUT 10:30 PM. MARCOS WAS OUTSIDE. [redacted] WENT TO SLEEP SHORTLY THEREAFTER AND SLEPT SOUNDLY UNTIL 4:40 AM WHEN THE ALARM RANG. MARCOS ASKED [redacted] WHAT TIME IT WAS AND THEN GOT UP AND LEFT. HE WAS ALREADY FULLY DRESSED. SCOUT [redacted]T STILL BE ASLEEP. [redacted] CAME OVER WITH HIS FLASHLIGHT AND SHOOK [redacted] ON THE SHOULDER TO WAKE HIM UP. [redacted] GOT RIGHT UP. [redacted] SPOKE LITTLE.

[redacted] LEFT THE TEPEE TO WAKE UP THE REST OF THE SCOUTS

J. Michael Devitt

SCMOD: J. MICHAEL DEVITT

STAFF MEMBER: [redacted]

[redacted]

JULY 31, 1985.

ON TUESDAY, JULY 30, CAMP STAFF MEMBERS MARCOS AREVALO LUNA AND [redacted] TOOK 20 SCOUTS ON AN OVERNIGHT CAMPOUT TO U-LAKE. MOST OF THE SCOUTS SLEPT OUTDOORS. MARCOS WAS GOING TO SLEEP ~~[illegible]~~ OUTDOORS BUT DID GO INTO TEPEE LATER.

[redacted] INVITED SCOUT [redacted], TROOP 576, AGE 12 TO SLEEP IN THE TEPEE WITH HIM. MARCOS STAYED OUTSIDE TALKING TO ANOTHER SCOUT UNTIL ABOUT MIDNIGHT. HE THEN WENT INTO THE TEPEE TO GO TO SLEEP. HE DOES NOT RECALL EVEN TOUCHING [redacted] AS HE GOT INTO HIS SLEEPING BAG. HE STAYED IN HIS SLEEPING BAG UNTIL [illegible] WOKE HIM UP AT 4:30 AM BY HIS ALARM CLOCK AND SHOWED MARCOS IT WAS TIME TO WAKE UP THE SCOUTS. HE CLAIMS [redacted] HAD TROUBLE SLEEPING DURING THE NIGHT. MARCOS SLEPT IN CENTER WITH [redacted] ON ONE SIDE AND [redacted] ON THE OTHER ABOUT 1 1/2-2 FEET AWAY.

MARCOS WENT ONCE TO [redacted] AND WOKE HIM UP BY SHAKING HIM WITH HIS HANDS UNTIL HE SAT UP AND THEN MARCOS WENT OUTSIDE TO WAKE UP THE OTHER SCOUTS IN A SIMILAR WAY. HE DID NOT [illegible] INTO HIS SLEEPING BAG.

MARCOS LEFT THE ROOM FIRST AND THEN [redacted] LEFT TO HELP WAKE UP THE OTHER SCOUTS.

MARCOS ADMISSIONS: GETTING UP ABOUT 1:30 AM TO GO TO BATHROOM.

SCRIBE: J. MICHAEL SMITH

INTERPRETER: JUAN RIVERA

MARCOS WAS READ THE ALLEGATIONS OF SCOUT [redacted] AND DENIES THE TOUCHING INCIDENTS.

To Whom It May Concern:

My name is Steven Weller, and I am currently an elementary school teacher in the Orting, Washington School District. I have taught at the elementary level and coached athletics at the elementary, junior high and high school levels in Washington and Idaho for the past fifteen years.

I was, a few years ago, [redacted] fourth grade teacher. I found [redacted] to be both a bright and dependable student. He was well prepared for each day at school, and I also recall that he was quite active in the few extra-curricular activities available to an elementary student (dramatics, choir, school patrol).

I, as a classroom teacher, see in [redacted] the qualities that make for the maturing into a fine citizen. I also remember his mother to be a concerned, caring and active parent, and these characteristics in a child's parent are central to the child's growth.

If for any reason further comments by me regarding [redacted] character, are needed, please feel free to get in touch with me at school ([redacted] Orting, Wa, 98360 [redacted]) or at home ([redacted] Puyallup, Wa 98372 [redacted]).

Respectfully,

Steven R. Weller

Steven R. Weller

10/2/85

To Whom it may Concern,

This letter is to recognize the character of one, [redacted] [redacted] I, Joe Kilby, have known [redacted] for the past three years. I was his fifth grade teacher and currently have [redacted] in my seventh grade science class. [redacted] character is superlative in nature. He has always demonstrated to be of high moral fiber, completely trustworthy, and one who shows respect for all others. He has been an above-average student and one whom every one likes. If there be any questions concerning [redacted] please contact me at [redacted]

[redacted]

Mr. Joe H. Kilby
Middle School Teacher

Oct. 2, 85

To Whom it May Concern,

My name is Mr. M.L. Elvrom, I'm a teacher at [redacted] in Orting, Washington. I've been teaching and coaching these past ten years.

During the 1984-85 school year, [redacted] was a student in my sixth grade class. As a student in my class I have had ample time to work with and observe [redacted].

In my professional opinion [redacted] is a very sincere, responsible and trust worthy young boy.

During the time [redacted] was in my class, I have never known him to cheat, lie or be dishonest, at any time.

Sincerely,

Mr. Mason L. Elvrom

Mr. M L. Elvrom
[redacted]
Orting, Wash. 98580

JULY 31, 1985

ON TUESDAY, JULY 30, A GROUP OF 10-15 OR MORE SCOUTS PLUS STAFF MEMBERS [redacted] AND MARCOS ARNOLD LORL WENT TO U-LAKE FOR AN OVERNIGHT CAMPOUT FOR CAMPING MERIT BADGE. MOST OF THE SCOUTS SLEPT OVERNIGHT OUTDOORS. MARCUS PLANNED TO SLEEP OUTDOORS BY THE FIREPLACE.

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[redacted] LEFT THE TEEPEE TO WAKE UP THE REST OF THE SCOUTS

ABOUT THIS TIME THE SCOUTS WERE GETTING UP TO RETURN TO CAMP.

THE INDIVIDUAL INVOLVED WAS CAMP STAFF MEMBER MARCOS ARMANDO LEAL.

SCRIBE: [signature]

SCOUT: [redacted]

WITNESS: [signature] SM T-576

[redacted] T-576

ORTING, WA 98360

JULY 31, 1985

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J. Michael Devitt

SCRIBE: J. MICHAEL DEVITT

STAFF MEMBER: [redacted]

JULY 31, 1985

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MARCOS LEFT THE ROOM FIRST AND THEN [redacted] LEFT TO HELP

WAKE UP THE OTHER SCOUT.

MARCOS REMEMBERS GETTING UP ABOUT 1:30 AM TO GO TO BATHROOM.

SIGNED: J. MICHAEL SMITH

INTERPRETER: JUAN FAVELA

MARCOS WAS ASKED THE ALLEGATIONS OF SCOUT [redacted]

AND DENIES THE TOUCHING INCIDENTS.

INTERNATIONAL CAMP-STAFF PROGRAM APPLICATION

LA-14

(Please type or print in black ink in duplicate.)

Please Complete Application

For office use only
Arrival
Departure



Submit through Scout Association of MEXICO (Country)

PERSONAL DATA

☒ Male ☐ Female

Name AREVALO LEAL (Last (family) name) MARCOS (First) ADRIAN (Middle)

Street address [redacted]

City MEXICO D.F. Country MEXICO

Nationality MEXICAN Passport No.

Telephone No. [redacted] Birthdate 10 (Day) APRIL (Month) 60 (Year)

Place of birth MEXICO D.F. (City) MEXICO (Country)

Native language SPANISH Religion EVANGELIC

Age 24 YEARS Height 5.9 FOOTS Weight 178 POUNDS Belt size 34 inches

Name that I would like to be called MARCOS

Conversational level in English: ☐ good ☒ fair

In case of emergency contact:

Name [redacted] Address [redacted] MEXICO D.F.

EDUCATION

Highest school ESCUELA SUPERIOR DE INGENIERIA MECANICA Y ELECTRICA Date 1979 - 1984

Fields of study ELECTRONIC, COMPUTER AND COMMUNICATION

REFERENCES (You must specify if you are a student or are working. If employed, name your job.)

Present employer: Name IND. ELECTRONICAS ESE Address LAGO CHALCO #195

Student at ______ or employed as ______

Personal reference: Name ULRICH T. URHAN Address BLVD. CONDADO DE SAYAVEDRA 409
CONDADO DE SAYAVEDRA
ATIZAPAN EDO. DE MEXICO

HEALTH

Are you now in sound health without physical or mental defects? ☒ yes ☐ no

If no, explain ______

Required health and medical form to be completed and enclosed.

SCOUT RECORD

Rank EXPLORER MASTER Unit EXPLORER Location GROUP 61

Are you a registered/warranted Scouter? ☒ yes ☐ no Position ______

Years service: Scout SEVEN Venturer ______ Rover ______ Adult ______

[illegible] WOOD BADGE [illegible] Wood Badge [illegible] 1979

CONF027236

CAMP SKILLS

I feel I can help instruct in (check all that you feel you can help)

Waterfront		Outdoor		Program		Leadership	
rowing		hiking	X	music		steward	
scuba		nature		sports		planning	
sailing		cooking		archery		business	
swimming		camping	X	stories		training	X
canoeing	X	pioneering	X	campfires	X	commissioner	
lifesaving		orienteering		marksmanship		troop leader	X
instructing		mountaineering	X	arts and crafts		public relations	

Other special skills

AVAILABILITY

Please check choice of participation dates: I will be available anytime from June to August

	Arrival	Departure
☐	May 26	
☒	June 18	☒ August 26
☐	Other	

STATEMENT

On a separate paper, submit a statement in English giving your reasons for wanting to become a part of the International Camp Staff Program and telling how you feel you can best fit into the program.

AGREEMENT

I understand that this application includes my request for personal accident insurance and sickness insurance to be provided on my behalf by the BSA. If I am selected, the Boy Scouts of America can expect my loyalty and full cooperation at all times while I am on assignment in the U.S.A.

Signature of applicant [signature] Date

ENDORSEMENTS

For Church—Community—School

From personal knowledge, I believe that this applicant will be a credit to Scouting and I recommend him.

Signed [signature] Position Rector Date 25 de Enero de 1985

For Scouting

	Exceptional	Good	Fair
Physical—health		X	
Mental—alert, imaginative, judgement		X	
Personal—Scout Oath and Law	X		
Leadership—respect of men and boys		X	
Scoutcraft—enthusiastic and skilled	X		
Adaptability—to new culture and BSA camp	X		

Signed [signature] David E. Ortega Zarate Scouter's position Assistent Training Wood Badge Date 24·I·85

Association Approval

Signed [signature] Position Int. Commissioner's Asst. Date 26/2/85

Remarks

NOTE: Keep original form for your personal record. Make reproductions for agency use. Be sure information and signatures are legible on reproduced copies.

NAME

PERSONAL HEALTH AND MEDICAL RECORD FORM

BOY SCOUTS OF AMERICA

AGENCY USE ONLY

See reverse for recertification and for interval health history

I. IDENTIFICATION

AGE ___ SEX ___ Date of Birth 04 10 60

NAME Arevalo Leal Marcos

ADDRESS [redacted]

CITY & STATE Mexico D.F. ZIP 15200

HEALTH/ACCIDENT INSURANCE ______ POLICY NO ______

IN AN EMERGENCY NOTIFY:

NAME [redacted] relationship ______

ADDRESS [redacted] phone [redacted]

CITY & STATE Mexico D.F. other phone

PERSONAL PHYSICIAN ______ phone ______

II. EMERGENCY MEDICAL INFORMATION:

Has or is subject to: (Check and give details)

- ☐ Allergy to a medicine, food, plant, animal, or insect toxin
- ☐ Any condition that may require special care, medication or diet.
- ☐ Asthma ☐ Convulsions ☐ Heart trouble ☐ Contact lenses
- ☐ Diabetes ☐ Fainting spells ☐ Bleeding disorders ☐ Dentures

EXPLAIN ______

III. HAS IT EVER BEEN NECESSARY TO:

Restrict activities for medical reasons? ☒ No ☐ Yes
Take regular medicine or have special care? ☒ No ☐ Yes
Explain below if yes

To the best of my knowledge the information in sections I, II, III and V and regarding immunizations is accurate and complete. I request physician to examine applicant, to give needed immunization, and to furnish requested information to other agencies as needed. I give my permission for full participation in BSA programs, subject to limitations noted herein. In the event of illness or accident in the course of such activity, I request that measures be instituted without delay as judgment of medical personnel dictates.

PARENT OR GUARDIAN ______ (Must sign if applicant is under 18)

APPLICANT'S SIGNATURE [signature]

Date signed ______

IMMUNIZATIONS:

	Last Year Given
TETANUS	
DIPHTHERIA	
POLIO	

Has Had	Vaccination	Disease
MEASLES	☐	☐
MUMPS	☐	☐
RUBELLA	☐	☐
PERTUSSIS	☐	☐
CHICKEN POX	☐	☐

Religious preference

IV. PHYSICIAN'S EVALUATION AND ADVICE:

APPROVED FOR PARTICIPATION IN — EXCEPT (specify)

- ☒ Hiking and camping ______
- ☒ Water activities ______
- ☒ Competitive sports ______
- ☒ All activities ______

RECOMMENDATIONS (Explain any restrictions OR limitations) ______

Approved for a period of 1 YEAR based on medical history (section V) and,
___ Section VI. Health examination completed today OR
___ Section VII. Health declaration from exam of (Mo/Yr) ______ that was taken within the last 3 years.

SIGNED ______ DATE ______
(M.D. or licensed to practice medicine)

NOTE. Sign both record card and form.

PARENT (or applicant if over 18) FILL IN SECTIONS I, II, III & V BEFORE SEEING PHYSICIAN. Check immunizations to be given at this time. Be sure to include any emergency information and restrictions or special care that should be observed. Especially be sure to record any injuries, illnesses, surgery or significant changes in condition of health of applicant since last complete examination.

PHYSICIAN:

- Please insist applicant furnish complete history for review each year before exam or evaluation
- After reviewing completed history, proceed with either VI or VII below
- Perform complete exam (section VI) at least every 3 years. (Annually for adults, for high adventure or for other strenuous activities.)
- For youth only: if applicant has had complete exam within 3 years and there is no significant change in health history or condition, you may use section VII
- After completion of either section VI or VII below, summarize any restrictions and/or recommendations in section IV above and sign.

V. MEDICAL HISTORY

Date of most recent complete physical examination (month and year) Sep 19 84
Are you aware of any current health problems? ☐ No ☒ Yes
Now under medical care or taking medicines? ☒ No ☐ Yes
Has there been any surgery, injury, illness, allergy or change in health status since last complete physical examination? ☒ No ☐ Yes

Give dates and full details below for any "yes" answers

HAS THERE DISEASE OF (PAST OR PRESENT) HISTORY OF:	No	Yes	year	Details
[illegible] illness	☒	☐		
[illegible] injury	☒	☐		
[illegible]	☒	☐		
[illegible]	☒	☐		
[illegible] glands	☒	☐		
Eyes	☒	☐		
sinus	☒	☐		
[illegible] tonsils	☒	☐		
[illegible]		☐		
[illegible]		☐		
[illegible] lungs	☒	☐		
[illegible]	☐	☐		
[illegible] murmur		☐		
[illegible] rheumatic fever		☐		
[illegible] bowels	☒	☐		
[illegible]	☒	☐		
[illegible]	☐	☐		
[illegible]		☐		
[illegible]		☐		
[illegible]		☐		
[illegible]		☐		
[illegible] problems	☐	☐		
[illegible]	☐	☐		
[illegible] limbs, joints	☐	☐		
[illegible]	☒	☐		
[illegible] condition	☒	☐		
[illegible]	☐	☐		

VI. HEALTH EXAMINATION:

DATE 21-Jan-85
Ht [illegible] Wt 179 [illegible]
BP 80 120 Pulse ______

VISION Color OK ☐ ABN ☐

Uncorrected	Corrected	HEARING
R 20/___	20/___	___/20
L 20/___	20/___	___/20

Check box if normal; circle if abnormal and give details below

- ☐ Growth development ☒ Teeth tonsils ☒ Genitourinary
- ☒ Skin glands hair ☒ Respiratory ☒ Skeletomuscular
- ☒ Head neck thyroid ☒ Cardiovascular ☒ Neuropsychiatric
- ☒ Eyes ears nose ☒ Abdomen, hernia, rings ☐ Other (specify)

LABORATORY Urinalysis (Dip stick) Albumin NEG Sugar NEG

OTHER LAB TEST Only if specifically indicated or required

Urinalysis Sp. Gr ______ React ______
Microscopic ______
Hemoglobin (or HCT) ______
Tuberculin test Pos ______ Neg ______ Yr ______
Other ______
COMMENTS ______

VII. HEALTH DECLARATION

There has been NO SIGNIFICANT CHANGE in health history or condition SINCE applicant's LAST qualifying EXAMINATION of: ______

Applicant is approved for participation in activities as recorded in section IV above.
Physician's initials ______

PLEASE DO NOT STAPLE THIS FORM

APPROVED OMB 3116-0008 EXP. 3-31-87

United States Information Agency

EXCHANGE VISITOR FACILITATIVE STAFF GC-V

CERTIFICATE OF ELIGIBILITY FOR EXCHANGE VISITOR (J-1) STATUS

A711730

PART I — IT IS HEREBY CERTIFIED THAT:

1. Arevalo Leal (FAMILY NAME OF EXCHANGE VISITOR) Marcos (FIRST NAME) Adrian (MIDDLE NAME) (X) Male ( ) Female

born 04 (Mo.) 10 (Day) 60 (Yr.) in Mexico D.F. (City) Mexico (Country)

a legal permanent resident of Mexico (Country) MX (Code) whose position in that country is Electronics 314 (Pos. Code)

U.S. address Boy Scouts of America [redacted]

THE PURPOSE OF THIS FORM IS TO:

1 (X) Begin a new program
2 ( ) Extend an on going program
3 ( ) Transfer to a different program
4 ( ) Replace a lost form
5 ( ) Permit visitor's immediate family to enter U.S. separately.

2. will be sponsored by Boy Scouts of America to participate in Exchange Visitor Program No [illegible] which is still valid and is officially described as follows.

A program of the National Council of the Boy Scouts of America to bring qualified foreign Scout leaders to the United States to pursue counselor activities at summer camps operated by local and national councils followed by individual sightseeing tours while living with Scout families, to promote the general interests of International Exchange.

3. This form covers the period from 5 (Mo.) 15 (Day) 85 (Yr.) to 9 (Mo.) 1 (Day) 85 (Yr.) (one year maximum)

If this form is for family travel or replaces a lost form, the expiration date on the exchange visitor's I-94 is ____

4. The category of this visitor is 1 ( ) Student, 2 ( ) Trainee, 3 ( ) Teacher, 4 ( ) Professor, 5 ( ) Research Scholar or Specialist, 6 ( ) International Visitor, 7 ( ) Medical Trainee, 8 ( ) Alien employee of the Bureau of Broadcasting. The specific field of study, research, training or professional activity is 3140 (Sub/Field Code) verbally described as follows:

Counselor in a Boy Scout camp

5. During the period covered by this form, it is estimated that the following financial support (in U.S. $) will be provided to this exchange visitor by:

a. (X) The Program Sponsor in item 2 above $ 300.00

Financial support from organizations other than the sponsor will be provided by one or more of the following:

b1 ( ) U.S. Government Agency(ies): ____ (Agency Code). $ ____ b2 ____ (Agency Code). $ ____
c1 ( ) International Organization(s): ____ (Int. Org. Code). $ ____ c2 ____ (Int. Org. Code). $ ____
d. ( ) The Exchange Visitor's Government $ ____
e. ( ) The binational Commission of the visitor's Country $ ____
f. ( ) All other organizations providing support $ ____
g. ( ) Personal funds $ ____

(If necessary, use above spaces for funding by multiple U.S. Agencies or Int'l Organizations)

6. I.N.S. USE

7. Robert M. Browning, Jr., Associate Director (Name of Official Preparing Form) International Division, BSA (Title)

1325 Walnut Hill Lane, Irving, TX 75038-3096 (Address)

[signature] (Signature of Responsible Officer) 3/25/85 (Date)

PART II—ENDORSEMENT OF CONSULAR OR IMMIGRATION OFFICER REGARDING SECTION 212(e) OF THE I.N.S.

I, (Name) ____
(Title) ____
determined that this alien in the above program
1. ( ) is not subject to the two year residence requirement;
2. ( ) is subject, based on: A. ( ) government financing and/or
B. ( ) the Exchange visitor skills list and/or
C. ( ) PL 94-484 as amended

(Signature of Officer) ____ (Date) ____

PART III—STATEMENT OF RESPONSIBLE OFFICER FOR RELEASING SPONSOR (FOR TRANSFER OF PROGRAM)

Date ____. Transfer of this exchange visitor from program No ____ sponsored by ____ to the program specified in item (2) is necessary or highly desirable and is in conformity with the objectives of the Mutual Educational and Cultural Exchange Act of 1961

(Signature of Officer) ____ (Date) ____

MARCOS ADRIAN AREVALO LEAL - MEXICO (ICSP)

Tacoma, Washington [redacted]
George Leonard, SE
Harold Wyler, Staff

Call on 8/7 - In custody of sherriff - In Jail - No formal arraignment - Charges by parent of minor boy molested in camp.

Hearing on 8/12, 2:00 PM - Postponed until 8/15.

Hearing on 8/15 - 2:00 PM - Formally arraigned and charged... Indecent liberties. Released on own recognizance; under supervision of Mr. and Mrs. Edmund Carey (and their 16 year old son). ADDRESS: - [redacted], Tacoma, WA 98406

Represented by Legal Counsel: Larry King - [redacted]

Must have evaluations by expert in sexual deviation; Spanish speaking; or give evidence that he has found such a person; limited on involvement and contacts with minors.

8/26 - Call from Ivo Stern, International Commissioner, Mexico, reg. Marcos. Received our telex. Talked with boy and host family, Carey, by phone. Everything apparently under control at moment.

He says, boy denies any wrongdoing. Expressed appreciation for letting Scouts de Mexico know about situation. Stern also talked with boy's grandparents.

Asked that we inform him of any new development or changes. We agreed. Asked info be sent direct to him at his Telex No. [redacted] Mexico City.

August 16, 1985
11:45 AM

Mr. Harold Weiler called regarding the jailed Scout in Tocomo. He said Marco was arraigned and charged with indecent liberties. DA would not give him any further information. Mr. Weiler said Marco would probably be let out on bail and would need money and housing until the trial.

Debbie

August 16, 1985

FROM: Robert H. Browning, Jr., S211

TO: David C. Park, S[illegible]

Mickey McAllister asked me to provide you the following information. An International Camp Staff member from Mexico serving in the camp operated by the Mt. Rainier Council at Tacoma, Washington, has been arrested, arraigned, and charged with indecent liberties, due to an incident at camp, charges have been brought by the victim's parents. Arraignment took place on August 15th. The individual is Marcos Adrian Arevalo Leal, age [illegible], from Mexico City.

He has been released on his own recognizance under the supervision of Mr. and Mrs. Edmund Carey, [redacted], Tacoma, Washington 98405. They are Scouters who he became acquainted with during the camp season. They are providing shelter and food for him. He is represented by legal counsel, Larry King, Phone [redacted] He is required to have evaluation by an expert in sexual deviation behavior by a Spanish speaking individual. He is also limited in his movement, and in contact with minors. Representatives in the council at Tacoma are securing a written statement from the prosecutors office regarding these charges and will send us a copy. The next hearing is set for 9:00 AM, October 10th, and the trial for October [illegible].

We have notified, by telex, on this date, the Asociacion De Scouts De Mexico and Jose Leal Trejo, at Yurecuaro #80, Mexico D.F. 15200, who was listed as the emergency contact by Marcos. Copy of the two telex are attached.

dp
enclosures
cc: E. M. McAllister

TELEGRAM CABLE

DATE Au[illegible] 16, 1985

MAILGRAM - MUST HAVE ZIP CODE

INTERNATIONAL

TWX

BRANCH:

TO:

addressee's name
[redacted]
addressee's firm (if applicable)
[redacted]
street address
city, state and zip code
MEXICO D.F. 15200

TELEPHONE [redacted]

MESSAGE:

REGRET TO INFORM YOU RETURN OF MARCOS AREVALO LEAL
FROM CAMP STAFF ASSIGNMENT DELAYED. IS CHARGED
WITH INDECENT LIBERTIES, RELEASED ON OWN
RECOGNIZANCE UNDER SUPERVISION OF MR. AND MRS.
EDMUND CAREY, [redacted] TACOMA,
WASHINGTON 98406, WHO ARE PROVIDING FOOD AND SHELTER.
TRIAL DATE SET FOR OCTOBER 28TH. REPRESENTED BY
LEGAL COUNSEL, LARRY KING, PHONE [redacted].
HAVE NOTIFIED ASOCIACION DE SCOUTS DE MEXICO.

ROBERT M. BROWNING, JR.
ASSOCIATE DIRECTOR
INTERNATIONAL DIVISION

dp

SENDER'S NAME Debbie Pryor

SERVICE International

ACCOUNT NO. 2680-007

DATE SENT 8-16-85

TIME COMPLETED 2:45 PM

OPERATOR Rose

LOG NO. 4709

[illegible signature]

1275

TELEGRAM CABLE DATE August 16, 1985

MAILGRAM - MUST HAVE ZIP CODE

INTERNATIONAL TWX

BRANCH:

TO:

addressee's name
IVO STERN
addressee's firm (if applicable)
ASOCIACION DE SCOUTS DE MEXICO A.C.
street address
CORDOBA 57 COLONIA ROMA
city, state and zip code
06700 MEXICO, D.F. MEXICO

CABLE: ESCULTISMO, MEXICO CITY / TELEPHONE NO: 511-00-52

MESSAGE:

INTERNATIONAL CAMP STAFFER, MARCOS ADRIAN AREVALO LEAL, DETAINED BY LEGAL AUTHORITIES IN TACOMA, WASHINGTON, U.S.A. CHARGED WITH INDECENT LIBERTIES, FREE ON OWN RECOGNIZANCE, TRIAL DATE SET FOR OCTOBER 28TH. FREE UNDER THE SUPERVISION OF MR. AND MRS. EDMUND CAREY, WHO ARE HOUSING AND FEEDING HIM AT THEIR HOME, [redacted] TACOMA, WASHINGTON 98406. HAS LEGAL COUNSEL, LARRY KING, PHONE [redacted] MARCOS APPARENTLY OUT OF MONEY AM NOTIFYING BY TELEX EMERGENCY FAMILY CONTACT JOSE LEAL TREJO IN MEXICO D.F. WILL APPRECIATE ANY SUGGESTIONS YOU MAY OFFER.

ROBERT M. BROWNING, JR.
ASSOCIATE DIRECTOR
INTERNATIONAL DIVISION

SENDER'S NAME Debbie Pryor

SERVICE International

ACCOUNT NO. 2680-007

DATE SENT 8-16-85

TIME COMPLETED 2:43 pm

OPERATOR RCSR

LOG NO. 4708

1275